

TX 4213720101



DEPARTMENT OF THE ARMY

HEADQUARTERS U.S. ARMY AIR DEFENSE ARTILLERY CENTER AND FORT BLISS
FORT BLISS, TEXAS
August 6, 1987



REPLY TO
ATTENTION OF

Directorate of
Engineering and Housing

SUPERFUND BRANCH

Ms. Sabrina M. Wells
Superfund Compliance Section (6H-EC)
U.S. Environmental Protection Agency
Region VI
Allied Bank Tower at Fountain Place
1445 Ross Avenue
Dallas, Texas 75202

x-Ref SA Vol #1

Dear Ms. Wells:

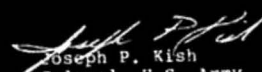
Enclosed is EPA Form 8900-1 for the Fort Bliss Hazardous Waste
Storage Facility, as requested by your letter dated July 22, 1987.

Your previous request for this information in March 1987 may
have been lost because of the wrong address. Fort Bliss is an
Army installation. Our correct address is as follows:

Commander
U.S. Army Air Defense Artillery Center and Fort Bliss
Directorate of Engineering and Housing
ATTN: Environmental Management Office
Fort Bliss, Texas 79916-6103

If you have further questions on this matter, please contact
Mr. Nickolas, this Directorate's Environmental Management Office,
at (915) 560-7930 or 568-5502.

Sincerely,


Joseph P. Kish
Colonel, U.S. Army
Director, Engineering and Housing
SUPERFUND
FILE

Enclosure

MAR 06 1992

REORGANIZED

TX # 213 720 101

EPA Notification of Hazardous Waste Site

United States
Environmental Protection
Agency
Washington DC 20460

This initial notification information is required by Section 103(c) of the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 and must be mailed by June 9, 1981.

Please type or print in ink. If you need additional space, use separate sheets of paper. Indicate the letter of the item which applies.

A Person Required to Notify:

Enter the name and address of the person or organization required to notify.

Name COLONEL Joseph P. Kish
Street ATZC-DEH
City Fort Bliss State TX Zip Code 79916

B Site Location:

Enter the common name (if known) and actual location of the site.

Name of Site Hazardous Waste Storage Facility
Street Bldg 11614
City Fort Bliss County El Paso State TX Zip Code 79916

C Person to Contact:

Enter the name, title (if applicable), and business telephone number of the person to contact regarding information submitted on this form.

Name (Last, First and Title) RAB, FAZLUR, CHIEF, Environmental Mgmt Off
Phone (915) 568-7930/5502/6185

D Dates of Waste Handling:

Enter the years that you estimate waste treatment, storage, or disposal began and ended at the site.

From (Year) 82 To (Year) present

E Waste Type: Choose the option you prefer to complete

Option 1: Select general waste types and source categories. If you do not know the general waste types or sources, you are encouraged to describe the site in Item I—Description of Site.

General Type of Waste:
Place an X in the appropriate boxes. The categories listed overlap. Check each applicable category.

1. ☒ Organics
2. ☒ Inorganics
3. ☒ Solvents
4. ☒ Pesticides
5. ☒ Heavy metals
6. ☒ Acids
7. ☒ Bases
8. ☒ PCBs
9. ☐ Mixed Municipal Waste
10. ☐ Unknown
11. ☐ Other (Specify)

Source of Waste:
Place an X in the appropriate boxes.

1. ☐ Mining
2. ☐ Construction
3. ☐ Textiles
4. ☐ Fertilizer
5. ☐ Paper/Printing
6. ☐ Leather Tanning
7. ☐ Iron/Steel Foundry
8. ☒ Chemical, General
9. ☐ Plating/Polishing
10. ☒ Military/Ammunition
11. ☐ Electrical Conductors
12. ☒ Transformers
13. ☐ Utility Companies
14. ☐ Sanitary/Refuse
15. ☐ Photofinish
16. ☒ Lab/Hospital
17. ☐ Unknown
18. ☒ Other (Specify)

Motor Pool Operations

Option 2: This option is available to persons familiar with the Resource Conservation and Recovery Act (RCRA) Section 3001 regulations (40 CFR Part 261).

Specific Type of Waste:
EPA has assigned a four-digit number to each hazardous waste listed in the regulations under Section 3001 of RCRA. Enter the appropriate four-digit number in the boxes provided. A copy of the list of hazardous wastes and codes can be obtained by contacting the EPA Region serving the State in which the site is located.

D001	U052	D013
D002	U117	U197
D003	U112	U226
U002	U133	D116
U003	F003	U220
U211	U159	U228
U080	D008	U239
F001	D154	
U044	U161	
F002	U242	

Notification of Hazardous Waste Site

Side Two

F	Waste Quantity:	Facility Type	Total Facility Waste Amount
	Place an X in the appropriate boxes to indicate the facility types found at the site.	1. <input type="checkbox"/> Piles	Cubic feet
	In the "total facility waste amount" space give the estimated combined quantity (volume) of hazardous wastes at the site using cubic feet or gallons.	2. <input type="checkbox"/> Land Treatment	Gallons 2500
	In the "total facility area" space, give the estimated area size which the facilities occupy using square feet or acres.	3. <input type="checkbox"/> Landfill	Total Facility Area
		4. <input type="checkbox"/> Tanks	Square feet 800
		5. <input type="checkbox"/> Impoundment	Acres
		6. <input type="checkbox"/> Underground Injection	
		7. <input checked="" type="checkbox"/> Drums, Above Ground	
		8. <input type="checkbox"/> Drums, Below Ground	
		9. <input checked="" type="checkbox"/> Other (Specify)	H/W Storage by Containers

G Known, Suspected or Likely Releases to the Environment:

Place an X in the appropriate boxes to indicate any known, suspected, or likely releases of wastes to the environment.

☐ Known ☐ Suspected ☐ Likely ☒ None

Note: Items Hand I are optional. Completing these items will assist EPA and State and local governments in locating and assessing hazardous waste sites. Although completing the items is not required, you are encouraged to do so.

H Sketch Map of Site Location: (Optional)

Sketch a map showing streets, highways, routes or other prominent landmarks near the site. Place an X on the map to indicate the site location. Draw an arrow showing the direction north. You may substitute a publishing map showing the site location.

Please see Enclosed Map

I Description of Site: (Optional)

Describe the history and present conditions of the site. Give directions to the site and describe any nearby wells, springs, lakes, or housing. Include such information as how waste was disposed and where the waste came from. Provide any other information or comments which may help describe the site conditions.

Please See Enclosed Map

J Signature and Title:

The person or authorized representative (such as plant managers, superintendents, trustees or attorneys) of persons required to notify must sign the form and provide a mailing address (if different than address in item A). For other persons providing notification, the signature is optional. Check the boxes which best describe the relationship to the site of the person required to notify. If you are not required to notify check "Other".

Name Col Joseph P. Kish

Street ATZC-DEH

City Fort Bliss State TX Zip Code 79916

Signature *Joseph P. Kish* Date 7-14-87

☐ Owner, Present
☐ Owner, Past
☐ Transporter
☒ Operator, Present
☐ Operator, Past
☐ Other